

PART B - ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence, including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. **See reverse for Certificate of Mailing.**

1. CORRESPONDENCE ADDRESS NEW USE: added and 3. for communication PENNIE & EDMONDS 1155 AVENUE OF THE AMERICAS NEW YORK, NY 10036 PAPER TO BE ENTERED (50)	2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change) INVENTOR'S NAME: <u> </u> Street Address: <u> </u> City, State and ZIP Code: <u> </u> CO-INVENTOR'S NAME: <u> </u> Street Address: <u> </u> City, State and ZIP Code: <u> </u> <input type="checkbox"/> Check if additional changes are on reverse side
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SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP/ART UNIT	DATE MAILED
07/20/69	06/03/98	002	HUTZELL, P	1806 02/10/92
First Named Applicant: <u>HODOSZEWICZ, JULIUS S.</u>				

TITLE OF INVENTION:
MONOCLONAL ANTIBODIES TO A NEW ANTIGENIC MARKER IN EPITHELIAL PROSTATIC CELLS AND SERUM OF PROSTATIC CANCER PATIENTS

RECEIVED
 1992
 SPECIAL PROGRAM EXAMINATION UNIT

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	DATE DUE
1 6453-002	530-387.000	A05	UTILITY	YES	05/11/92

3. Further correspondence to be mailed to the following: S. Leslie Misrock, Esq. PENNIE & EDMONDS 1155 Avenue of the Americas New York, N.Y. 10036	4. For printing on the patent front page: list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. 1 <u>PENNIE & EDMONDS</u> 2 <u> </u> 3 <u> </u>
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CS14114 03/20/92 07202869 18-1150 140 242 565.00CH CS14115 03/20/92 07202869 18-1150 140 381 30.00CH	DO NOT USE THIS SPACE
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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type) (1) NAME OF ASSIGNEE: <u>CYTOGEN CORPORATION</u> (2) ADDRESS: (City & State or Country) <u>New Jersey</u> (3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION <u>New Jersey</u>	6a. The following fees are enclosed: <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies <u> </u> 6b. The following fees should be charged to: <u>6-1150</u> (Minimum of 10) DEPOSIT ACCOUNT NUMBER <u> </u> (Enclose Part C) <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advanced Order - # of Copies <u>10</u> <input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees (Minimum of 10)
A. <input type="checkbox"/> This application is NOT assigned. <input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office. <input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.	The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above. (Signature of party in interest of record) <u>S. Leslie Misrock</u> (Date) <u>3/12/92</u> NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.